

Alternative Futures Group Limited

# Liverpool City South Branch Office

## Inspection report

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11 June 2021

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## Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service effective?

Good ●

Is the service caring?

Good ●

Is the service responsive?

Good ●

Is the service well-led?

Good ●

# Summary of findings

## Overall summary

### About the service

Liverpool City South Branch Office is a supported living service providing personal care to people living in their own homes. The service supports people who have a learning disability and/or mental and physical health needs. At the time of our inspection the service supported 72 people.

People lived in a variety of properties, which were in keeping with neighbouring properties and had access to local amenities and transport. Communal areas of people's homes were shared but all had their own bedrooms.

### People's experience of using this service and what we found

People and relatives felt safe with the staff. One person said, "I depend on my carers and I feel very safe with them." There were systems in place to safeguard people from the risk of abuse and staff took appropriate action when any such concerns arose. People had personalised risk assessments and staff knew the people they were supporting well, including how to support people safely and effectively. People received their medicines safely. However, we have made a recommendation about improving record keeping relating to medicines administration.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

We expect health and social care providers to guarantee autistic people and people with a learning disability the choices, dignity, independence and good access to local communities that most people take for granted. Right Support, right care, right culture is the statutory guidance which supports CQC to make assessments and judgements about services providing support to people with a learning disability and/or autistic people.

The service was able to demonstrate how they were meeting the underpinning principles of Right support, right care, right culture. People were supported to live as independently as possible and make their own choices. People's care was person-centred and promoted their dignity. Staff had a positive attitude and supported people to lead inclusive and empowered lives.

People and relatives told us staff supported people to live as independently as possible and they treated them with dignity and respect. Comments included, "I love my carers. They are a great support and they know when I need my private space. They make me feel at ease" and "They do treat [Relative] with respect. They always want to know his opinion and involve him in decision making."

People's care plans were person-centred and detailed. People and their relatives were involved in the care planning and review process, ensuring people received the right support in line with their choices. Staff

supported people to develop and maintain relationships with friends and loved ones, including going out into their local community to enjoy social activities and learn new skills.

People and relatives told us the service was well-led and staff communicated well with them. One relative said, "This organisation and their staff are terrific. I could not fault them. The staff are so kind and caring and they all get along so well together too." There was a positive and caring culture amongst staff at the service. People and relatives spoke positively about how staff involved them. One relative commented, "We are part of the care meetings to discuss [Relative's] needs and they are regularly reviewed. We always get our opinions heard."

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

#### Rating at last inspection

This service was registered with us on 11/10/2019 and this is the first inspection.

#### Why we inspected

This was a planned inspection based on our approach to inspecting newly registered services.

#### Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

## The five questions we ask about services and what we found

We always ask the following five questions of services.

### Is the service safe?

Good ●

The service was safe.

Details are in our safe findings below.

### Is the service effective?

Good ●

The service was effective.

Details are in our effective findings below.

### Is the service caring?

Good ●

The service was caring.

Details are in our caring findings below.

### Is the service responsive?

Good ●

The service was responsive.

Details are in our responsive findings below.

### Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

# Liverpool City South Branch Office

## **Detailed findings**

### Background to this inspection

#### The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Care Act 2014.

#### Inspection team

This inspection was carried out by three inspectors. An Expert by Experience also assisted by carrying out telephone calls to gather feedback from people supported by the service and their relatives. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

#### Service and service type

This service provides care and support to people living in 'supported living' settings, so that they can live as independently as possible. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for supported living; this inspection looked at people's personal care and support.

The service had a manager registered with the Care Quality Commission. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

#### Notice of inspection

We gave the service 24 hours' notice of the inspection. This was to ensure the registered manager would be in the office to assist with the inspection and that people supported would be available to speak with us.

Inspection activity started on 10 June 2021 and ended on 11 June 2021. We visited the office location on 10

June 2021 and visited people in their homes. We made telephone calls to people supported and their relatives on 11 June 2021.

#### What we did before inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report. We used all of this information to plan our inspection.

#### During the inspection

We spoke with seven people supported by the service and six people's relative about their experience of the care provided. We spoke with 12 members of staff including the registered manager, compliance manager, team leaders and support workers.

We reviewed a range of records. This included six people's support plans and multiple medication records. We looked at four staff files in relation to recruitment and staff supervision and appraisal records. A variety of records relating to the management of the service, including policies and procedures were also reviewed.

# Is the service safe?

## Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

This is the first inspection for this newly registered service. This key question has been rated good. This meant people were safe and protected from avoidable harm.

### Assessing risk, safety monitoring and management

- People had personalised risk assessments which were reviewed regularly and gave staff the information needed to manage the risks associated with people's care.
- Staff knew the people they were supporting well, including how to support people safely and effectively.
- Some risks associated with people's care had not been considered or documented in as much clear detail as they could have been. We discussed this with the registered manager who took action to address this during and after the inspection.

### Using medicines safely

- People received their medicines safely and as prescribed.
- Staff had the necessary training and skills to support people with their medicines and their competency was regularly checked.
- There were quality assurance processes in place to ensure people received their medicines safely.
- Some aspects of record keeping relating to medicines administration could be improved, in particular regarding creams and body maps, use of thickener and 'as required' (PRN) medication protocols.

We recommend the provider reviews and improves its record keeping relating to medicines administration.

### Systems and processes to safeguard people from the risk of abuse

- People and relatives felt safe with the staff and commented, "I depend on my carers and I feel very safe with them" and "The care that [Relative] is getting at the moment is spot on. [Relative] is well looked after."
- There were systems in place to safeguard people from the risk of abuse and staff took appropriate action when any such concerns arose.
- Staff received safeguarding training and were knowledgeable about identifying and managing safeguarding concerns.

### Staffing and recruitment

- People received the amount of support they needed from suitably trained staff.
- People and their relatives told us they were consistently supported by a regular group of staff they were familiar with.
- Staff were safely recruited by the service, ensuring that only people who were suitable to work with vulnerable adults were employed.

### Preventing and controlling infection

- Staff had access to relevant and up-to-date information and guidance in relation to infection prevention

and control (IPC).

- Staff were supported to access regular COVID-19 testing.
- Staff had received training on infection prevention and control and used personal protective equipment (PPE) in line with the national guidance.
- Staff supported people to keep themselves as safe as possible throughout the COVID-19 pandemic, such as supporting them whilst shielding, isolating or accessing vaccination services.

Learning lessons when things go wrong

- There were systems in place to record and respond to accidents and incidents.
- This information was regularly reviewed by staff to ensure appropriate action had been taken and to identify any emerging patterns or trends that needed addressing.
- Relevant policies and procedures were in place to help guide staff.



# Is the service effective?

## Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

This is the first inspection for this newly registered service. This key question has been rated good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- Staff assessed people's needs and preferences before they were supported by the service. Staff used this information to develop personalised care plans and risk assessments.
- People's needs in relation to equality and diversity were considered during the assessment and care planning process, such as age, disability and religion.

Staff support: induction, training, skills and experience

- New staff were inducted into their role with support from senior staff. This included a probation period, completion of training, shadow-working and observation of them working.
- Staff completed regular training to ensure they had the knowledge and skills to safely and effectively meet people's needs. Where necessary, staff completed additional training relevant to the needs of the people they were supporting.
- Staff told us they felt well-supported in their roles and they were able to access further guidance and support from senior staff when needed.

Supporting people to eat and drink enough to maintain a balanced diet

- People and their relatives said staff gave people all the support they needed with their food and drink. This included supporting people to make choices about what they ate and drank, assisting them to go shopping and prepare meals, where possible.
- People's care plans gave staff clear information about their individual needs and preferences relating to food and drink.

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- Staff supported people to access healthcare services when needed to maintain their health and wellbeing. One person said, "If I needed to go to the doctor's or a dental appointment, staff would help me to get one."
- Staff were sensitive to people's individual health needs and were understanding of different people's feelings and anxiety toward accessing healthcare services. For example, staff supported a person to arrange receiving their COVID-19 vaccination at home which avoided them having to enter environments they found distressing.

Ensuring consent to care and treatment in line with law and guidance

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The Act requires that, as far as possible,

people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the MCA. Where people may need to be deprived of their liberty in order to receive care and treatment an application can be made to the Court of Protection who can authorise deprivations of liberty

We checked whether the service was working within the principles of the MCA, and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- People's consent was sought and obtained in line with the principles of the MCA.
- Staff understood their responsibilities under the principles of the MCA and ensure people's rights were protected.
- People and relatives told us they were given choice and control over how their care and support was provided.
- Some documentation relating to people's capacity and best interest decisions was not readily available and was overdue a review. The registered manager confirmed these issues had been rectified shortly after the inspection.

# Is the service caring?

## Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

This is the first inspection for this newly registered service. This key question has been rated good. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; respecting equality and diversity

- People and relatives were very happy with the care and support provided by the staff. One person said, "I love my carers. They are a great support and they know when I need my private space. They make me feel at ease."
- Staff were familiar with the people they supported, including their individual support needs, likes and dislikes.
- Staff considered people's individual equality and diversity needs as part of the care planning process and ensured these needs were met. For example, one person enjoyed a traditional style of food in keeping with their cultural background. Staff worked with the person's family to learn how to prepare traditional meals for them.
- The service received multiple compliments from relatives and other health professionals about the quality of care staff provided to people.

Supporting people to express their views and be involved in making decisions about their care

- People and their relatives were involved in making decisions about their care, such as during care plan review meetings. One relative commented, "They do treat him with respect. They always want to know his opinion and involve him in decision making."
- There was a respectful culture amongst which recognised the importance of people making their own choices and living as independently as possible.
- Staff supported people to access additional support from independent advocacy services when needed.

Respecting and promoting people's privacy, dignity and independence

- People and relatives told us staff treated them with dignity and respect. One person commented, "Staff know exactly when I need to be on my own and they respect that. I like to play music and practice singing and when I do that, they leave me alone to get on with it."
- Staff encouraged people's independence in various ways. Examples included the use of assistive technologies, video communications and supporting physical adaptations to people's homes which enabled them to manage daily tasks by themselves.
- One relative said, "Staff try to increase [Relative's] independence by supporting him to take his own medication. It's really good, and now he is able to take tablets with water and this has made such a difference."
- People's confidential information, such as care plans, was stored securely and only people who required access could do so.

# Is the service responsive?

## Our findings

Responsive – this means we looked for evidence that the service met people's needs.

This is the first inspection for this newly registered service. This key question has been rated good. This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- People and relatives were involved in the care planning and review process, ensuring people received the right support in line with their choices.
- People's care plans were person-centred, regularly reviewed and gave staff the information they needed to safely and effectively support people. The information included in people's care plans enabled staff get to know people and what was important to them.
- Other health and social care professionals gave positive feedback about the support provide by staff. Comments included, "It is clear the team continue to look at new ways of supporting [Person], ensuring his support is least restrictive in nature, promoting his independence and ensuring the best outcomes for him" and "[Staff] clearly know [Person] inside and out and care so much for her. [Staff] also worked brilliantly together like a tag team showing that they truly know how she needs to be supported."

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- People's individual communication needs were considered and met by the service. This information was documented in people's care plans to assist and guide staff.
- Staff ensured alternative communication methods were made available to people when necessary, such as braille or easy-read text.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- Staff supported people to develop and maintain relationships with friends and family. For example, throughout the COVID-19 pandemic staff supported people to keep in touch with their loved ones via telephone and video calls. Staff also supported relatives to visit their loved ones safely and in line with guidance.
- Staff supported people to enjoy hobbies, activities and interests that were important to them. This included gaining new experiences, skills and qualifications. Examples included getting a job, obtaining professional qualifications, growing fruit and vegetables, learning to swim and developing IT skills.

Improving care quality in response to complaints or concerns

- The service had an effective complaints policy and procedure in place, ensuring complaints were appropriately investigated, responded to and, where necessary, remedial action taken.
- People and relatives said they had not needed to make any complaints but were confident about doing so if necessary. One person said, "If I had anything to complain about, I would talk to the Team Leader or my [Relative]."

#### End of life care and support

- The service was not supporting anyone with end-of-life care at the time of this inspection. However, this was considered as part of the care planning process and important information, such as people's wishes regarding resuscitation, was documented.
- Staff had received positive feedback from relatives and health professionals about the end-of-life care and support they had given in the past.

# Is the service well-led?

## Our findings

Well-Led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

This is the first inspection for this newly registered service. This key question has been rated good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; and how the provider understands and acts on their duty of candour responsibility

- People and relatives told us the service was well-led and staff communicated well with them. Comments included, "This organisation and their staff are terrific. I could not fault them. The staff are so kind and caring and they all get along so well together too" and "I think it is well managed. They [staff] are always very helpful and keep an eye on [Relative's] medical needs etc. They always keep me informed."
- There was a positive and caring culture amongst staff at the service. This was underpinned by the provider's vision, mission and values aimed at supporting people to 'control their lives, 'unlock skills, gifts and talents' and 'choose and achieve their aspirations'.
- Staff had shown true dedication to the people they support and their safety during the pandemic.
- The registered manager understood their responsibility regarding the duty of candour and promoted a culture of openness and transparency.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- The service had an experienced and knowledgeable registered manager.
- Staff had notified CQC of all significant events which had occurred, as is required.
- The provider had a range of regularly reviewed policies and procedures in place to help guide staff and staff were able to easily access this information when needed.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- The service had systems in place to gather people's and relatives' feedback about the service. Examples included during care reviews and regular satisfaction surveys.
- People and relatives spoke positively about how staff involved them. Comments included, "They've also continued to get to know [Relative] really well and they've really listened to me and my [Relative]" and "We are part of the care meetings to discuss [Relative's] needs and they are regularly reviewed. We always get our opinions heard."
- Staff told us they enjoyed their work and felt well-supported by senior staff.
- Staff were able to give their feedback about the service in regular team meetings, supervisions and surveys. The provider also ran initiatives targeted at recognising staff contribution and supporting staff wellbeing.

Continuous learning and improving care

- The service had structured and organised quality assurance processes in place to monitor, assess and improve the quality of service being provided.
- Senior staff carried out regular spot checks and audits to monitor staff practice and ensure people were receiving high-quality and safe care.

#### Working in partnership with others

- Staff worked in partnership with other health and social care professionals, such as GPs, nurses and social workers, to ensure people's health and wellbeing was maintained.